Supportive Services for Veteran Families (SSVF)

FY 2017 Program Updates

December 15, 2016

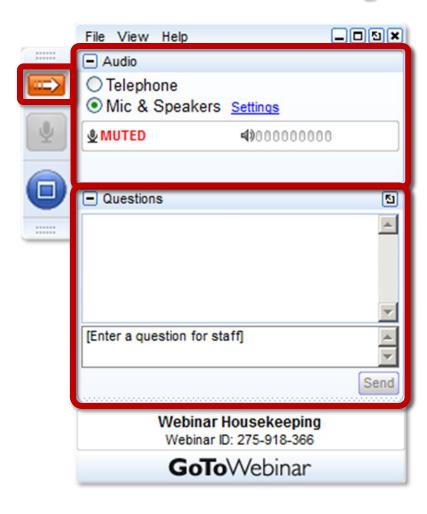https://attendee.gotowebinar.com/recording/86611109734337795

LISTEN TO THE RECORDED PRESENTATION

Webinar Format

- **Webinar will last approximately 90 minutes**
- **Participants' phone connections are "muted" due to the high number of callers**
  - **Questions can be submitted during the webinar using the Q&A function**
- **Questions can also be submitted anytime to SSVF@va.gov**
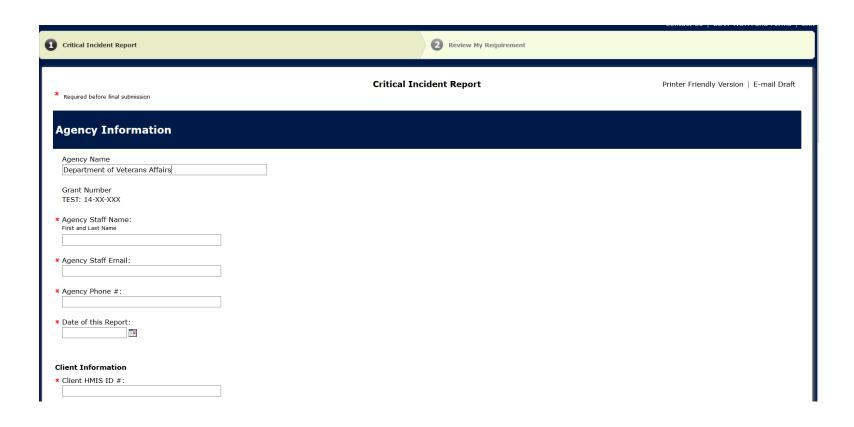
Questions

Your Questions
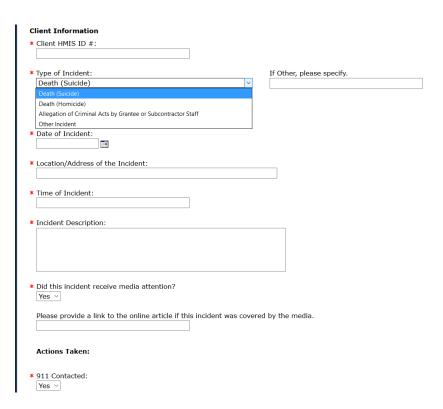Submit questions and comments via the Questions panel

Presenters & Agenda

- **Welcome & Introductions**
  - John Kuhn, National Director, SSVF
- **Critical Incident Process (New)**
  - Jill Albanese, SSVF Quality Supervisor
- **Quarterly Certification – GIFTS**
  - Lindsay Hill, SSVF Project Coordinator
- **Participant Satisfaction Survey Overview for SSVF Grantees**
  - Rico Aiello, SSVF Compliance Project Coordinator
  - Jim Brown, M. Davis Call Center Manager
  - Kim Dorazio, M. Davis Research Analyst
  - Melissa Labriola, M. Davis Project Manager
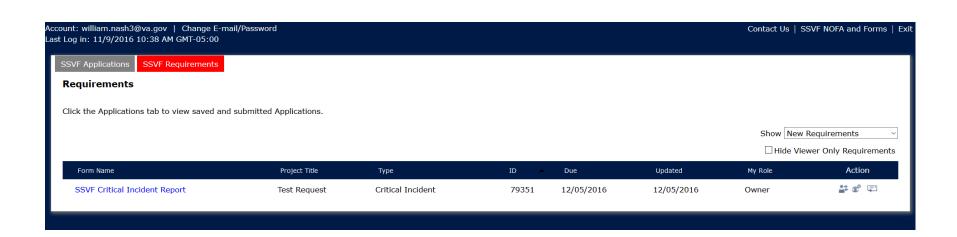- **NOFA Q&A**
  - John Kuhn, National Director, SSVF

New Critical Incident Process

Critical Incident template in GIFTS

New Critical Incident Process

Critical Incident Template

Client Information

* Client HMIS ID #:
[   ]

* Type of Incident: If Other, please specify.
[Death (Suicide)   ▼]   [   ]
| Death (Suicide) |
| Death (Homicide) |
| Allegation of Criminal Acts by Grantee or Subcontractor Staff |
| Other Incident |

* Date of Incident:
[   ] 📅

* Location/Address of the Incident:
[   ]

* Time of Incident:
[   ]

* Incident Description:
[   ]

* Did this incident receive media attention?
[Yes ▼]

Please provide a link to the online article if this incident was covered by the media.
[   ]

Actions Taken:

* 911 Contacted:
[Yes ▼]

New Critical Incident Process

CI Template in GIFTS request more as needed

SSVF Applications	SSVF Requirements

Requirements

Click the Applications tab to view saved and submitted Applications.

Show [New Requirements ▼]

☐ Hide Viewer Only Requirements

Form Name	Project Title	Type	ID ▲	Due	Updated	My Role	Action
SSVF Critical Incident Report	Test Request	Critical Incident	79351	12/05/2016	12/05/2016	Owner	

New Critical Incident Process

- **Why has the template changed?**
  - Grantees have demonstrated improvements in addressing critical incidents
  - Program office still requires notification of serious Critical Incidents (Suicides, Homicides, Staff issues)

- **What if we require another template per quarter?**
  - Notify RC that you have an additional CI to submit

New Critical Incident Process

- **Serious CI reported to the SSVF Program Office**
  - Veteran Suicides
  - Veteran involved homicides
  - Staff improprieties

- **What about other Critical Incidents?**
  - Grantees follow internal policies for CI that do not need to be submitted to the SSVF Program Office

HUD-VASH Referral Packet

- **Updated version available on SSVF Website**
  - Tab 2
    - Forms

- **Updates to the packet**
  - Clarification of GPD eligibility
  - HMIS Data Element entry form included
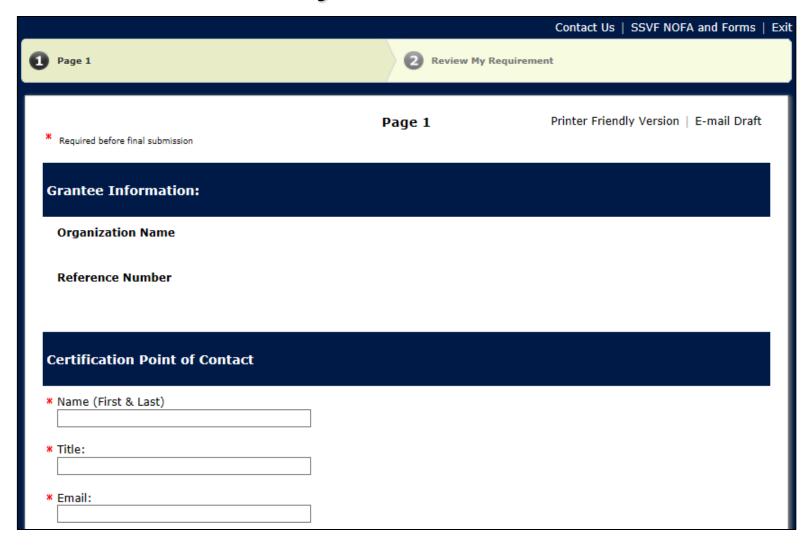
HUD-VASH Referral Packet FAQs

- **Can we still serve HUD-VASH needing homeless prevention?**
  - Yes but packet is for RRH only
- **Why is the packet only used for RRH?**
  - SSVF grantees must screen prevention households using the Homeless Prevention Screening tool
    - Must be at imminent risk and meet "but for"
    - May require additional services including legal services, employment and could benefit from ongoing support
    - VA staff not expected to complete screening tool

HUD-VASH Referral Packet FAQs

- **Could we add our own ROI to the packet?**
  - Yes if necessary
- **We need additional information to meet HMIS requirements, how do we get this?**
  - SSVF and HUD-VASH staff should work with HMIS administrators to determine how additional elements can be collected
- **We have a 30% cap on HUD-VASH referrals; how do we remove that restriction?**
  - The SSVF office does not impose a cap as long as this is part of the community planning process

GIFTS Quarterly Certification

- **SSVF Program Office has updated the GIFTS Quarterly Certification for FY17.**

- **Certification contains the following sections:**
  - Compliance with the SSVF Final Rule and approved grant agreement
  - Data quality
    - Data entry and quality control
    - Consumer survey participation
  - Trainings/Webinars
  - Expenditure and HHS subaccount drawdowns

- **Quarterly Certification Requirement will be activated at the beginning of each quarter.**
  - Online forms can be shared for review and/or transferred to another owner within grantee agency (be aware of your user accounts).

- **Deadline: <u>No Later Than 20th Calendar Day after Quarter.</u>**

GIFTS Quarterly Certification

1 Page 1

2 Review My Requirement

Page 1

Printer Friendly Version | E-mail Draft

* Required before final submission

Grantee Information:

Organization Name

Reference Number

Certification Point of Contact

* Name (First & Last)

* Title:

* Email:

GIFTS Quarterly Certification

Final Rule:

* I certify that this SSVF program is in compliance with the Final Rule (38 CFR part 62).

No ▾

* I certify that I am operating in compliance with my signed grant agreement.

No ▾

Data Quality:

* I certify that our program is participating in the SSVF Client Participant Satisfaction survey to maintain compliance with our grant agreement.

No ▾

* I certify that my program has successfully uploaded to the HMIS Repository on a monthly basis.

No ▾

* I certify that data received by the VA via our monthly HMIS uploads accurately represents our program performance.

No ▾

If the answer to the previous question was "no", please outline your plan to improve upload quality including timelines/dates.

* I certify that our program is actively working to improve data quality. Grantees are expected to review data routinely for data quality and consistency.

No ▾

GIFTS Quarterly Certification

Please indicate whether you are able to run aggregate data reports for your SSVF
* program. Per SSVF program policy, grantees are expected to routinely review data
entered into their HMIS system.

[No ∨]

* If you are unable to run aggregate data reports for your program, have you
contacted your HMIS administrators to resolve this issue?

[No ∨]

* I certify that full SSN information is entered for all Veterans served in our SSVF
program.

[No ∨]

* I certify that accurate CoC codes are entered for all clients served in our SSVF
Program.
Note: CoC codes should be linked to the client/head of household

[No ∨]

* I certify that accurate 3 or 5-digit VA Medical Center (VAMC) codes are entered for
all clients served in our SSVF Program.
Please refer to station codes provided by the SSVF Program Office.

[No ∨]

* I certify that Residential Move-In Dates are entered as soon as Rapid Re-Housing
clients move in to a permanent residence.

[No ∨]

* I certify that Homeless Prevention Screening Form data and Threshold Scores are
entered for all prevention clients served in our SSVF Program.

[No ∨]

I certify that accurate living situation/destination information is entered at program
* entry and exit for all clients served in our SSVF Program. The use of "Other" as a
destination option is used sparingly and only in instances where no other destination
code is a viable option.

[No ∨]

GIFTS Quarterly Certification

Trainings/Webinars:

* I certify that all new employees have completed the webinars listed in the Grantee Orientation Guide available on www.va.gov/homeless/ssvf/index.asp.

[No ▾]

* I certify that SSVF staff (new and existing) review all trainings/webinars provided by the SSVF Program Office.

[No ▾]

* Please certify that your SSVF program staff, including those responsible for fiscal procedures, have completed the SSVF webinar training "Audit Guidelines, Fraud Prevention, Reporting, and Compliance" within the last 365 days. This webinar covers SSVF program reporting, compliance, and fraud and abuse deference. This should be reviewed on an annual basis by all SSVF staff.
https://www4.gotomeeting.com/register/264618359

[No ▾]

Expenditure & HHS Subaccount Drawdowns:

* I certify that payment requests from HHS Payment Management System reflect actual spending.

[No ▾]

If HHS subaccounts drawdowns do not reflect actual spending please explain the variance in the below section.

[text area]

* I certify that all expenditures are for costs approved on the SSVF Budget.

[No ▾]

* I certify that I have received approval from the SSVF Program Office for any modifications made to my approved SSVF budget.

[No ▾]

* I certify that all spending is in compliance with all OMB regulations.

[No ▾]

* I certify that actual expenditures as of the end of the quarter are within spending limitations. Projected spending rates per quarter: Q1=15%, Q2=40%, Q3=65%.

[No ▾]

Additional feedback for SSVF Compliance Office:

[text area]

I certify that I am authorized to submit this response on behalf of this SSVF program.

* Please note: Documentation supporting all certifications must be maintained by the grantee and made available for monitoring visits and audits.

☐

[Save & Finish Later] [Review & Submit]

GIFTS Quarterly Certification

Timeline for Review:

– SSVF Regional Coordinators will review each submission.

– Regional Coordinator may request additional information from grantees or request technical assistance (depending on results of review).

Contact SSVF@va.gov for assistance.

December 15, 2016

MDAC Introduction and Participant Satisfaction Survey Overview for SSVF Grantees

About MDAC

- **A full service market research company that provides insights which are analytical, strategic, tactical, operationally relevant, and impactful**

- **Established in 1985 with an experienced and diverse staff comprised of former private sector executives, government administrators, and academics**

- **National and regional demonstration projects, campaign and program evaluations and tracking studies**

- **www.mdavisco.com**

Presented By M. Davis and Company, Inc.

Importance of work

- **Information provided from Veterans helps sustain a continuous improvement process to better serve our veterans and their families.**

- **Participation is essential to assess Veteran perceptions of services received, to help determine potential actions to increase Veteran satisfaction and to reduce operational burden.**

- **Requirement under SSVF final rule**

Assessment Process Overview

- **Veterans can take the survey by phone, if online is not an option**

- **Veteran registered through weblink once within 30 days of final services**

- **If cell phone number & e-mail are included, text/e-mail invitation sent to Veteran**

- **Veteran provides feedback (Spanish version available)**

- **Receive quarterly reports with feedback from the Veterans you serve**

Presented By M. Davis and Company, Inc.

Registration Screen Shot

Grantee Registration Supportive Services for Veteran Families (SSVF) Program

- Please only register individuals once, and within 30 days of final services.

- If you provide an email and/or cell phone number, Veterans will be emailed and/or texted a link to take the survey within 24 hours.

- If Veteran does not have online access, he/she can call in to MDAC (Mon–Fri: 9:00 AM ET to 9:00 PM ET; Sat.: 10:00 AM ET to 9:00 PM ET; Sun: 1:00 PM ET to 9:00 PM ET) to take the survey with a live interviewer.Please provide the veteran with MDAC dedicated phone number for the VA SSVF survey, 1–800–626–3313, and the respondent ID that will appear on the following page.

- Without the Respondent ID, the veteran will not be eligible to take the survey over the phone.

Presented By M. Davis and Company, Inc.

Registration Screen Shot

Veteran's First Name (if first name is not provided, please type "Anonymous")

[   ]

If a cell phone number is not available, please enter "999-999-9999."

If an email address is not available, please enter "noemail@noemail.com".

Veteran's Cell Phone (XXX-XXX-XXXX) : [   ]

Veteran's Email Address (yourname@xxx.com) : [   ]

[Done]

Presented By M. Davis and Company, Inc.

Registration Screen Shot

Thank you for registering a veteran to take the VA SSVF Survey!

Please provide the veteran with MDAC's phone number for the VA SSVF survey,

Please Call: 1-800-626-3313
the Veteran's response id: 37533834

Powered By **QuestionPro**

Presented By M. Davis and Company, Inc.

Veteran introduction Screen Shot

Next Steps

Train staff and subcontractors on how to use the weblink

– Share webinar slides

– Save weblink to computer desktop (as many computers as needed)

– Ask questions

Call-in option is available beginning 1/3/2017

Presented By M. Davis and Company, Inc.

Questions?

MDAC

- Please call or email if you do not have a grant-specific weblink to register veterans, or if you have any questions

- vassvf@mdavisco.com (staff will respond within 24 hours)

- 215-790-8900 ext 132 If you need to leave a message, someone will return your call by the next business day)

Resources available on SSVF website

- Webinar slides, copy of survey

- http://www.va.gov/homeless/ssvf/index.asp

NOFA Q&A

John Kuhn, National Director, SSVF